



DATE: \_\_\_\_\_

Via Facsimile (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

**Re: CREDIT CARD AUTHORIZATION**

Dear Customer:

In order to process your payment using your credit card, we request that the following information be faxed to us at (323) 850-5302. This information is to verify your credit card information and will be shredded after verification. Thank you for your cooperation.

**PLEASE NOTE: A \$2.50 or 3% (whichever is greater) SERVICE CHARGE will apply to your transaction. Credit Card must be issued in the U.S. No others will be accepted.**

**CREDIT CARD TYPE (CIRCLE ONE PLEASE):                    MASTERCARD / VISA**

**CARD NUMBER:** \_\_\_\_\_

**EXPIRATION DATE:** \_\_\_\_\_

**CREDIT CARD SECURITY CODE** \_\_\_\_\_

**CARD HOLDER NAME**  
(AS IT APPEARS ON CARD) \_\_\_\_\_

**CARD HOLDER'S PHONE #** (\_\_\_\_\_) \_\_\_\_\_

**CARD HOLDER'S ADDRESS** \_\_\_\_\_

**WHERE STATEMENTS ARE MAILED** \_\_\_\_\_

**City:** \_\_\_\_\_ **State:** \_\_\_\_\_ **Zip** \_\_\_\_\_

**PLEASE PROVIDE A PHOTOCOPY OF:**

- 1) DRIVER'S LICENSE
- 2) FRONT & BACK OF CREDIT CARD
- 3) THIS IS REQUIRED IF YOU ARE NOT OUR MAILBOX HOLDER

I AUTHORIZE MAIL AND MORE ON HOLLYWOOD TO CHARGE MY CREDIT CARD FOR SERVICE(S) RENDERED AND/OR PRODUCT(S) PURCHASED.

Amount (if applicable):     \$ \_\_\_\_\_ + \$ \_\_\_\_\_ (\$2.50 or 3% Service Charge)

\_\_\_\_\_  
DATE

\_\_\_\_\_  
CARDHOLDER'S SIGNATURE

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**BELOW TO BE COMPLETED BY MAIL AND MORE ON HOLLYWOOD**

RECEIPT # \_\_\_\_\_ MAILBOX # \_\_\_\_\_ VERIFIED BY \_\_\_\_\_